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Bib Data Sheet

CONFIRMATION NO. 6942

<b>SERIAL NUMBER</b> 09/684,828	<b>FILING OR 371(c) DATE</b> 10/10/2000 <b>RULE</b>	<b>CLASS</b> 379	<b>GROUP ART UNIT</b> 2645	<b>ATTORNEY DOCKET NO.</b> 8285/397
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**APPLICANTS**

Teresa Farias Latter, Kildeer, IL;  
 Nancy Ann Book, Naperville, IL;  
 Mary Louise Hardzinski, Palatine, IL;  
 James Thomas Maciejewski, Spring Grove, IL;  
 John Wesley Moss, Lake Zurich, IL;  
 Thomas Joseph McBlain, Arlington Heights, IL;  
 Steven Darrell Benfield, Raleigh, NC;  
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 Walden Blaine Crabtree JR., Raleigh, NC;  
 Tracy Lynn Kato, Raleigh, NC;  
 Brian Scott Utesch, Raleigh, NC;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CON of 09/122,165 07/24/1998 PAT 6,178,232

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 01/22/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

757

**TITLE**

Method and system for providing enhanced caller identification screening using audible caller name announcement

<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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CON. of  
09/122,165  
ISSUED AS 6,178,232 B1  
CN JAN. 23, 2001  
FILED JULY 24, 1998

\*\* CONTINUING DATA \*\*\*\*\*

C.A R.C.F.

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE O.A R.C.F.

IF REQUIRED, FOREIGN FILING LICENSE

GRANTED \*\* 01/22/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 7	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>Olga Anwar</i> Initials: <i>O.A.</i>				

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## TITLE

Method and system for providing enhanced caller identification

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